

April 26, 2017

Tom Moe
USS Corporation
P.O. Box 417
8771 Park Ridge Dr
Mountain Iron, MN 55768

RE: Project: USS MinnTac NPDES-TB Wk3
Pace Project No.: 1285992

Dear Tom Moe:

Enclosed are the analytical results for sample(s) received by the laboratory on April 19, 2017. The results relate only to the samples included in this report. Results reported herein conform to the most current, applicable TNI/NELAC standards and the laboratory's Quality Assurance Manual, where applicable, unless otherwise noted in the body of the report.

If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Melisa M Woods
melisa.woods@pacelabs.com
(218)742-1042
Project Manager

Enclosures

cc: Cory Hertling
Terri Sabetti, NTS



REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.

CERTIFICATIONS

Project: USS MinnTac NPDES-TB Wk3

Pace Project No.: 1285992

Virginia Minnesota Certification ID's

315 Chestnut Street, Virginia, MN 55792

Alaska Certification UST-107

Alaska Certification UST-107

California Certification #2973

California Certification #2973

Alaska Certification #MN01084

Arizona Department of Health Certification #AZ0785

Minnesota Dept of Health Certification #: 027-137-445

North Dakota Certification: # R-203

Wisconsin DNR Certification # : 998027470

WA Department of Ecology Lab ID# C1007

Nevada DNR #MN010842015-1

Oklahoma Department of Environmental Quality

California Certification #2973

Duluth Minnesota Cerification ID's

4730 Oneota St., Duluth, MN 55807

Minnesota Dept of Health Certification #: 027-137-152

Wisconsin DNR Certification # : 999446800

North Dakota Certification #: R-105

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.

SAMPLE SUMMARY

Project: USS MinnTac NPDES-TB Wk3

Pace Project No.: 1285992

Lab ID	Sample ID	Matrix	Date Collected	Date Received
1285992001	SD 001 Seep 020	Water	04/19/17 10:40	04/19/17 11:35

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.

SAMPLE ANALYTE COUNT

Project: USS MinnTac NPDES-TB Wk3

Pace Project No.: 1285992

Lab ID	Sample ID	Method	Analysts	Analytes Reported	Laboratory
1285992001	SD 001 Seep 020	EPA 1664A TPH (1999)	DES	1	PASI-DUL
		USGS I-3765	JJH	1	PASI-V

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.

ANALYTICAL RESULTS

Project: USS MinnTac NPDES-TB Wk3

Pace Project No.: 1285992

Sample: SD 001 Seep 020		Lab ID: 1285992001		Collected: 04/19/17 10:40		Received: 04/19/17 11:35		Matrix: Water	
Parameters	Results	Units	Report Limit	MDL	DF	Prepared	Analyzed	CAS No.	Qual
1664 SGT-HEM, TPH									
Analytical Method: EPA 1664A TPH (1999)									
Total Petroleum Hydrocarbons	ND	mg/L	2.9	1.0	1		04/25/17 13:09		
USGS I-3765 TSS									
Analytical Method: USGS I-3765									
Total Suspended Solids	2.0	mg/L	1.0	1.0	1		04/21/17 10:06		

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.

QUALITY CONTROL DATA

Project: USS MinnTac NPDES-TB Wk3

Pace Project No.: 1285992

QC Batch:	111784	Analysis Method:	EPA 1664A TPH (1999)
QC Batch Method:	EPA 1664A TPH (1999)	Analysis Description:	1664 SGT-HEM, TPH
Associated Lab Samples:	1285992001		

METHOD BLANK: 441623 Matrix: Water

Associated Lab Samples: 1285992001

Parameter	Units	Blank Result	Reporting Limit	MDL	Analyzed	Qualifiers
Total Petroleum Hydrocarbons	mg/L	ND	3.0	1.0	04/25/17 11:35	

LABORATORY CONTROL SAMPLE: 441624

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Total Petroleum Hydrocarbons	mg/L	20	17.9	90	64-132	

MATRIX SPIKE SAMPLE: 441625

Parameter	Units	1286121003 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Total Petroleum Hydrocarbons	mg/L	<1.1	21.3	17.4	80	64-132	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.

QUALITY CONTROL DATA

Project: USS MinnTac NPDES-TB Wk3

Pace Project No.: 1285992

QC Batch:	111528	Analysis Method:	USGS I-3765
QC Batch Method:	USGS I-3765	Analysis Description:	USGS I-3765 Total Suspended Solids
Associated Lab Samples:	1285992001		

METHOD BLANK: 440990 Matrix: Water

Associated Lab Samples: 1285992001

Parameter	Units	Blank Result	Reporting Limit	MDL	Analyzed	Qualifiers
Total Suspended Solids	mg/L	ND	1.0	1.0	04/21/17 10:05	

LABORATORY CONTROL SAMPLE: 440991

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Total Suspended Solids	mg/L	239	234	98	80-120	

SAMPLE DUPLICATE: 440992

Parameter	Units	1285907001 Result	Dup Result	RPD	Max RPD	Qualifiers
Total Suspended Solids	mg/L	128	136	6	10	

SAMPLE DUPLICATE: 440993

Parameter	Units	1285909001 Result	Dup Result	RPD	Max RPD	Qualifiers
Total Suspended Solids	mg/L	34.0	35.0	3	10	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.

QUALIFIERS

Project: USS MinnTac NPDES-TB Wk3

Pace Project No.: 1285992

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.

ND - Not Detected at or above adjusted reporting limit.

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.

MDL - Adjusted Method Detection Limit.

PQL - Practical Quantitation Limit.

RL - Reporting Limit.

S - Surrogate

1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.

TNI - The NELAC Institute.

LABORATORIES

PASI-DUL Pace Analytical Services - Duluth

PASI-V Pace Analytical Services - Virginia

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.

QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: USS MinnTac NPDES-TB Wk3

Pace Project No.: 1285992


Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
1285992001	SD 001 Seep 020	EPA 1664A TPH (1999)	111784		
1285992001	SD 001 Seep 020	USGS I-3765	111528		

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.

PM: MMW
CLIENT: USS CORP

7

	Document Name: Sample Condition Upon Receipt Form	Document Revised: 15Mar2016 Page 1 of 1
	Document No.: F-VM-C-001-Rev.10	Issuing Authority: Pace Virginia, Minnesota Quality Office

**Sample Condition
Upon Receipt**

Client Name:

USS CORP

Project #:

WO#: 1285992

Courier: ☐ Fed Ex ☐ UPS ☐ USPS ☒ Client
☐ Commercial ☐ Pace ☐ Other: _____

PM: MMW Due Date: 05/03/17
 CLIENT: USS CORP

Tracking Number: _____

Custody Seal on Cooler/Box Present? ☐ Yes ☒ No **4-19-17 CS** Seals Intact? ☐ Yes ☐ No Optional: Proj. Due Date: Proj. Name:
 Packing Material: ☐ Bubble Wrap ☒ Bubble Bags ☒ None ☐ Other: _____ Temp Blank? ☒ Yes ☐ No
 Thermometer Used: ☒ 140792808 Type of Ice: ☒ Wet ☐ Blue ☐ None ☐ Samples on ice, cooling process has begun
 Cooler Temp Read °C: 4.1 Cooler Temp Corrected °C: 4.4 Biological Tissue Frozen? ☐ Yes ☐ No ☒ NA
 Temp should be above freezing to 6°C Correction Factor: +0.3 Date and Initials of Person Examining Contents: 4-19-17

Comments:

Chain of Custody Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1.
Chain of Custody Filled Out?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2.
Chain of Custody Relinquished?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	3.
Sampler Name and Signature on COC?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	4.
Samples Arrived within Hold Time?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	5. If Fecal: <input type="checkbox"/> <8 hours <input type="checkbox"/> >8, <24 hours <input type="checkbox"/> >24 hours
Short Hold Time Analysis (<72 hr)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	6.
Rush Turn Around Time Requested?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	7.
Sufficient Volume?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.
Correct Containers Used?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	9.
-Pace Containers Used?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10.
Filtered Volume Received for Dissolved Tests?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11. Note if sediment is visible in the dissolved containers.
Sample Labels Match COC?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	12.
-Includes Date/Time/ID/Analysis Matrix: <u>wt</u>		
All containers needing acid/base preservation will be checked and documented in the pH logbook.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	See pH log for results and additional preservation documentation
Headspace in Methyl Mercury Container	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	13.
Headspace in VOA Vials (>6mm)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	14.
Trip Blank Present?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	15.
Trip Blank Custody Seals Present?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Pace Trip Blank Lot # (if purchased):		

CLIENT NOTIFICATION/RESOLUTION

Field Data Required? ☐ Yes ☐ No

Person Contacted: _____ Date/Time: _____

Comments/Resolution: _____

FECAL WAIVER ON FILE Y N

TEMPERATURE WAIVER ON FILE Y N

Project Manager Review:

Melina Woods

Date: 4/19/17

Note: Whenever there is a discrepancy affecting North Carolina compliance samples, a copy of this form will be sent to the North Carolina DEHNR Certification Office (i.e. out of hold, incorrect preservative, out of temp, incorrect containers)

Intra-Regional Chain of Custody



Workorder: 1285992

Workorder Name: NPDES-TB WK3

Owner Received Date: 4/19/2017

Due Date: 5/3/2017

Received at:
Pace Analytical Virginia
315 Chestnut Street
Virginia, MN 55792
Phone (218)742-1042

Send To Lab:
Pace Analytical Duluth
4730 Oneota Street
Duluth, MN 55807
Phone (218) 727-6380

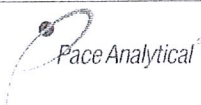
Report To:
Melissa M Woods

Item	Sample ID	Sample Type	Collect Date/Time	Lab ID	Matrix	HCL	Preserved Containers	EPA 1664A TPH (1999)	Requested Analysis	LAB USE ONLY
1	SD 001 Seep 020	PS	4/19/2017 10:40	1285992001	Water	2		X		
2										
3										
4										
5										

Transfers	Released By	Date/Time	Received By	Date/Time	Comments
1	Latic CP	4/19/17 1400	[Signature]	4/19/17 1400	
2	[Signature]	4/19/17 1605	Krista Herby	4/19/17 1605	
3					
4					

Cooler Temperature on Receipt	1.0 °C	Custody Seal (Y) or N	Received on Ice (Y) or N	Samples Intact (Y) or N
-------------------------------	--------	-----------------------	--------------------------	-------------------------

***In order to maintain client confidentiality, location/name of the sampling site, sampler's name and signature may not be provided on this COC document.
This chain of custody is considered complete as is since this information is available in the owner laboratory.

	Document Name: Sample Condition Upon Receipt Form	Document Revised: 17Apr2017 Page 1 of 1
	Document No.: F-DUL-C-001-rev.04	Issuing Authority: Pace Duluth Minnesota Quality Office

**Sample Condition
Upon Receipt**

Client Name:

Pace VM

Project #:

Courier: ☐ Fed Ex ☐ UPS ☐ USPS ☐ Client
☐ Commercial ☒ Pace ☐ Other: _____

Tracking Number: _____

Custody Seal on Cooler/Box Present? ☒ Yes ☐ No Seals Intact? ☒ Yes ☐ No Optional: Proj. Due Date: _____ Proj. Name: _____

Packing Material: ☐ Bubble Wrap ☒ Bubble Bags ☐ None ☐ Other: _____ Temp Blank? ☒ Yes ☐ No

Thermometer Used: ☒ IR-1 ☐ 161014660 Type of Ice: ☒ Wet ☐ Blue ☐ None ☐ Samples on ice, cooling process has begun

Cooler Temp Read °C: 1.0 Cooler Temp Corrected °C: 1.0 Biological Tissue Frozen? ☐ Yes ☐ No ☒ NA

Temp should be above freezing to 6°C Correction Factor: true Date and Initials of Person Examining Contents: KH 4/19/17

If temperature is ≤0°C, is there evidence of ice formation? ☐ Yes ☐ No ☐ NA

Comments:

Chain of Custody Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1.
Chain of Custody Filled Out?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2.
Chain of Custody Relinquished?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	3.
Sampler Name and Signature on COC?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	4.
Samples Arrived within Hold Time?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	5. If Fecal: <input type="checkbox"/> <8 hours <input type="checkbox"/> >8, <24 hours <input type="checkbox"/> >24 hours
Short Hold Time Analysis (<72 hr)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	6.
Rush Turn Around Time Requested?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	7.
Sufficient Volume?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.
Correct Containers Used?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	9.
-Pace Containers Used?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10.
Filtered Volume Received for Dissolved Tests?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11. Note if sediment is visible in the dissolved containers.
Sample Labels Match COC?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	12.
-Includes Date/Time/ID/Analysis Matrix: <u>wt</u>		
All containers needing acid/base preservation will be checked and documented in the pH logbook.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	See pH log for results and additional preservation documentation
Headspace in Methyl Mercury Container	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	13.
Headspace in VOA Vials (>6mm)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	14.
Trip Blank Present?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	15.
Trip Blank Custody Seals Present?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Pace Trip Blank Lot # (if purchased): _____		

CLIENT NOTIFICATION/RESOLUTION

Field Data Required? ☐ Yes ☐ No

Person Contacted: _____ Date/Time: _____

Comments/Resolution: _____

FECAL WAIVER ON FILE Y N

TEMPERATURE WAIVER ON FILE Y N

Project Manager Review: _____

Date: 4/20/17

Note: Whenever there is a discrepancy affecting North Carolina compliance samples, a copy of this form will be sent to the North Carolina DEHNR Certification Office (i.e. out of hold, incorrect preservative, out of temp, incorrect containers)